

**A NEW SYSTEM OF ANATOMY.** By Solly Zuckerman. (Pp. xiii + 579; figs. 540. 75s.)  
London: Oxford University Press.

IN recent years teachers of anatomy have been under attack from various quarters and are accused of teaching too much unnecessary detail to students who are already over-crammed with facts. Anatomists are alive to the significance of this and teaching is being modified accordingly. This book is one of a number appearing in recent years with the object of simplifying the course in the dissecting room. Whether this is a good thing or not is open to question, but this book succeeds in its object. The reviewer had intended to use a small group of students to find if the book fulfilled the purpose for which it was designed, but this was unnecessary as it had been introduced as the dissecting manual for the 2nd M.B., a fact indicating that in the Belfast medical school the Professor of Anatomy is alive to the demand, if not the need, for simplification.

The students like the book. It is rather bulky for a dissecting manual, but is extremely well bound and has waterproof covers and very good quality paper and printing and has been found very usable. This confirms the results of the similar severe tests that had already been performed in the Birmingham medical school.

As regards the contents, soundness and simplification is the theme. The illustrations are in the form of photographs of actual dissections, and, although this is not usually a satisfactory technique, in this case it has succeeded completely due to the excellent dissections and probably to the extremely skilful touching-up removing the excessive detail that usually renders a photograph useless to a student.

The text is sufficient for a dissecting manual.

S. A. V.

**MALFORMATIONS OF THE FACE.** By D. Greer Walker, M.A., M.D., B.Ch., M.Dent.Sc., F.D.S.R.C.S. (Pp. xii + 202; figs. 93. 37s. 6d.) Edinburgh and London: E. & S. Livingstone, 1961.

THIS is essentially a descriptive and anatomical study of the more complex malformations affecting the face. It is little concerned with conditions calling for surgical correction, such as hare lip. Terminology of these conditions, frequently dependent on some one physical sign, has now often become meaningless. Aetiological factors, including embryology, genetics, comparative morphology and atavism and moulding strains, are considered in the search for unification in classification and description. There are some valuable descriptions and observations pointing to useful groupings for further study. The frequent digressions and discussions on the related aspects do not all appear equally authoritative, and make this a difficult and inconclusive, and at times a frustrating book.

J. E. M.

**CEREBRAL PALSY IN CHILDHOOD AND ADOLESCENCE.** By J. L. Henderson, M.D., F.R.C.P.E. (Pp. viii + 403. 35s.) Edinburgh and London: E. & S. Livingstone, 1961.

THE literature on cerebral palsy is most confusing and, with few exceptions, of very little value. No fewer than six new classifications have appeared in the last decade. Our American colleagues have frequently led us astray with loose terminology, uncontrolled observations and by including patients which few of us would accept as having cerebral palsy.

The above criticisms do not apply to Professor Henderson and his colleagues who have provided us with a most excellent survey of cerebral palsy in the East of Scotland. Only a few will wish to criticise their definitions, classification, etc. Their figures for incidence, degree of physical and mental handicap, employability, etc., will be of considerable value to educationalists and others who have to make provision for the handicapped.

The summaries at the end of each chapter will appeal to many. There are, however, many valuable clinical observations not previously recorded which are not included in the summaries.

The treatment of cerebral palsy has never been carefully assessed and there are a few who think that physiotherapy, intensive or otherwise, may not be necessary. Our Scottish colleagues are of the opinion that more intensive physiotherapy and better home management may prevent minor deformities. It would appear that careful assessment of treatment is overdue.

W. I. F.